

**Fill in this information to identify your case:**

United States Bankruptcy Court for the:

**EASTERN DISTRICT OF TEXAS**

Case number (if known): \_\_\_\_\_

Chapter you are filing under:

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

**Official Form 101****Voluntary Petition for Individuals Filing for Bankruptcy****12/15**

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together--called a joint case--and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself****About Debtor 1:****About Debtor 2 (Spouse Only in a Joint Case):****1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

**Majid**

First Name

First Name

Middle Name

Middle Name

**Toloui**

Last Name

Last Name

Suffix (Sr., Jr., II, III)

Suffix (Sr., Jr., II, III)

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

First Name

First Name

Middle Name

Middle Name

Last Name

Last Name

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**xxx - xx - 1 3 6 0

OR

9xx - xx - \_\_\_\_\_

xxx - xx - \_\_\_\_\_

OR

9xx - xx - \_\_\_\_\_

<p><b>Debtor 1</b></p> <p><b>Majid</b> First Name</p> <p><b>Toloui</b> Middle Name</p> <p><b>Last Name</b></p>	<p><b>About Debtor 1:</b></p> <p><b>4.</b> Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</p> <p>Include trade names and doing business as names</p> <p><b>Business name</b></p> <p><b>Business name</b></p> <p><b>Business name</b></p> <p><b>EIN</b></p> <p><b>EIN</b></p>	<p><b>Case number (if known)</b></p> <p><b>About Debtor 2 (Spouse Only in a Joint Case):</b></p> <p><input checked="" type="checkbox"/> I have not used any business names or EINs.</p> <p><input type="checkbox"/> I have not used any business names or EINs.</p> <p><b>Business name</b></p> <p><b>Business name</b></p> <p><b>Business name</b></p> <p><b>EIN</b></p> <p><b>EIN</b></p>
<p><b>5. Where you live</b></p> <p><b>4809 Cypress Point</b> Number Street</p> <p><b>Frisco TX 75034</b> City State ZIP Code</p> <p><b>Denton</b> County</p> <p>If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.</p> <p>Number Street</p> <p>P.O. Box</p> <p>City State ZIP Code</p> <p>Number Street</p> <p>P.O. Box</p> <p>City State ZIP Code</p>		
<p><b>6. Why you are choosing this district to file for bankruptcy</b></p> <p><b>Check one:</b></p> <p><input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)</p> <p><b>Check one:</b></p> <p><input type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.</p> <p><input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)</p>		

## Part 2: Tell the Court About Your Bankruptcy Case

**7. The chapter of the Bankruptcy Code you are choosing to file under**

**Check one:** (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

Chapter 7

Chapter 11

Chapter 12

Chapter 13

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**8. How you will pay the fee**

**I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

**I need to pay the fee in installments.** If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A).

**I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**

No  
 Yes.

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
 MM / DD / YYYY

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**

No  
 Yes.

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
 MM / DD / YYYY if known

Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_

District \_\_\_\_\_ When \_\_\_\_\_ Case number, \_\_\_\_\_  
 MM / DD / YYYY if known

**11. Do you rent your residence?**

No. Go to line 12.  
 Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence?  
 No. Go to line 12.  
 Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

### Part 3: Report About Any Businesses You Own as a Sole Proprietor

**12. Are you a sole proprietor of any full- or part-time business?**

No. Go to Part 4.  
 Yes. Name and location of business

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

Name of business, if any \_\_\_\_\_

Number Street \_\_\_\_\_

\_\_\_\_\_

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

*Check the appropriate box to describe your business:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))  
 Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
 Stockbroker (as defined in 11 U.S.C. § 101(53A))  
 Commodity Broker (as defined in 11 U.S.C. § 101(6))  
 None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a *small business debtor*?**

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.  
 No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.  
 Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

### Part 4: Report If You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No  
 Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property? \_\_\_\_\_

Number Street \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Debtor 1 **Majid**  
 First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Majid  
 First Name Toloui  
 Middle Name   
 Last Name Case number (if known) \_\_\_\_\_

### Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.  
 Yes. Go to line 17.

16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.  
 Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer or business debts.

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17. Are you filing under Chapter 7?

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

No. I am not filing under Chapter 7. Go to line 18.

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?

No  
 Yes

18. How many creditors do you estimate that you owe?

<input type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input checked="" type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

19. How much do you estimate your assets to be worth?

<input type="checkbox"/> \$0-\$50,000	<input type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input checked="" type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

20. How much do you estimate your liabilities to be?

<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

Debtor 1 Majid  
 First Name Toloui  
 Middle Name Last Name Case number (if known) \_\_\_\_\_

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**X** /s/ Majid Toloui \_\_\_\_\_ **X** \_\_\_\_\_  
 Majid Toloui, Debtor 1 Signature of Debtor 2

Executed on 07/11/2016  
 MM / DD / YYYY

Executed on \_\_\_\_\_  
 MM / DD / YYYY

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**For your attorney, if you are represented by one**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

**If you are not represented by an attorney, you do not need to file this page.**

X /s/ Michael R. Sices \_\_\_\_\_ Date 07/11/2016  
Signature of Attorney for Debtor MM / DD / YYYY

Michael R. Sices

Printed name

Law Offices of Michael R. Sices, PC

Firm Name

2000 N. Central Expressway, Suite 209

Number Street

Plano  
City

TX  
State

75074  
ZIP Code

Contact phone (972) 914-8372 Email address michael@siceslaw.com

24070616  
Bar number

State

**Fill in this information to identify your case and this filing:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106A/B****Schedule A/B: Property**

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In****1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?**

No. Go to Part 2.  
 Yes. Where is the property?

1.1.

**4809 Cypress Point, Frisco TX 75034****4809 Cypress Point Frisco TX 75034**

County \_\_\_\_\_

**What is the property?**

Check all that apply.

Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

**Who has an interest in the property?**

Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?      Current value of the portion you own?**

**\$708,000.00      \$708,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

**Homestead** \_\_\_\_\_

Check if this is community property  
(see instructions)

**2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here..... →**

**\$708,000.00**

**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.**

**3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles**

No  
 Yes

Debtor 1	<b>Majid</b> First Name	<b>Toloui</b> Middle Name	Last Name	Case number (if known) _____
3.1.	<b>Who has an interest in the property?</b> Check one.			Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
Make:	<b>S550</b>			<input type="checkbox"/> Debtor 1 only
Model:	<b>Mercedes Benz</b>			<input type="checkbox"/> Debtor 2 only
Year:	<b>2011</b>			<input type="checkbox"/> Debtor 1 and Debtor 2 only
Approximate mileage:	<b>35,000</b>			<input checked="" type="checkbox"/> At least one of the debtors and another
Other information:	<b>2011 S550 Mercedes Benz (approx. 35000 miles)</b>			<input checked="" type="checkbox"/> Check if this is community property (see instructions)
3.2.	<b>Who has an interest in the property?</b> Check one.			Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
Make:	<b>Chevy</b>			<input type="checkbox"/> Debtor 1 only
Model:	<b>Tahoe</b>			<input type="checkbox"/> Debtor 2 only
Year:	<b>2015</b>			<input type="checkbox"/> Debtor 1 and Debtor 2 only
Approximate mileage:				<input checked="" type="checkbox"/> At least one of the debtors and another
Other information:	<b>2015 Chevy Tahoe</b>			<input checked="" type="checkbox"/> Check if this is community property (see instructions)
3.3.	<b>Who has an interest in the property?</b> Check one.			Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: <i>Creditors Who Have Claims Secured by Property.</i>
Make:	<b>Ford</b>			<input type="checkbox"/> Debtor 1 only
Model:	<b>T250 Van</b>			<input type="checkbox"/> Debtor 2 only
Year:	<b>2015</b>			<input type="checkbox"/> Debtor 1 and Debtor 2 only
Approximate mileage:	<b>22,000</b>			<input checked="" type="checkbox"/> At least one of the debtors and another
Other information:	<b>2015 Ford T250 Van (approx. 22000 miles) * This van is owned by Haramian Rugs, Inc. and so listed; however, out of an abundance of caution we are listing this vehicle and loan here based on a potential personal liability / guaranty.</b>			<input checked="" type="checkbox"/> Check if this is community property (see instructions)
4.	<b>Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories</b> Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories			
	<input checked="" type="checkbox"/> No			
	<input type="checkbox"/> Yes			
5.	Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....			→ <b>\$19,000.00</b>

### Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware	
<input type="checkbox"/> No	
<input checked="" type="checkbox"/> Yes. Describe..... <b>See continuation page(s).</b>	<b>\$16,000.00</b>
7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
<input checked="" type="checkbox"/> No	
<input type="checkbox"/> Yes. Describe.....	

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**8. Collectibles of value**

*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No  
 Yes. Describe.....

\_\_\_\_\_

**9. Equipment for sports and hobbies**

*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No  
 Yes. Describe.....

\_\_\_\_\_

**10. Firearms**

*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment

No  
 Yes. Describe.....

\_\_\_\_\_

**11. Clothes**

*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No  
 Yes. Describe..... **Wearing Apparel: Miscellaneous items under \$500 each.**

**\$500.00**

\_\_\_\_\_

**12. Jewelry**

*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No  
 Yes. Describe..... **Jewelry: Miscellaneous items under \$500 each.**

**\$2,000.00**

\_\_\_\_\_

**13. Non-farm animals**

*Examples:* Dogs, cats, birds, horses

No  
 Yes. Describe..... **2 dogs**

**\$0.00**

\_\_\_\_\_

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No  
 Yes. Give specific information.....

\_\_\_\_\_

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write the number here.....**

**\$18,500.00**

→

\_\_\_\_\_

**Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No  
 Yes..... Cash: .....

**\$100.00**

\_\_\_\_\_

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No  
 Yes..... Institution name:

Debtor 1	<b>Majid</b>	<b>Toloui</b>	Case number (if known) _____
	First Name	Middle Name	Last Name
17.1.	Checking account:	<b>Chase Bank checking account</b>	<b>\$0.00</b>
17.2.	Checking account:	<b>Chase Bank checking account (joint with daughter / property of daughter)</b>	<b>\$150.00</b>
<b>18. Bonds, mutual funds, or publicly traded stocks</b>			
<i>Examples:</i> Bond funds, investment accounts with brokerage firms, money market accounts			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes..... Institution or issuer name:			
<b>19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture</b>			
<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Give specific information about them..... Name of entity: % of ownership: <b>Haramian Rugs, Inc. is a defunct corporation closed May, 2016. It still has an open bank account at Chase Bank which currently has a negative balance. Haramanian owns various oriental rugs estimated to be valued at \$68,000.</b> <b>100%</b> <b>\$68,000.00</b> <b>Persopolis Oriental Rugs of Dallas, Inc. (Defunct corporation ended May, 2009.)</b> <b>100%</b> <b>\$0.00</b> <b>Toloui Enterprises, Inc. d/b/a last call rugs (shell entity was created but nothing was ever done with it - one bank account with compass bank \$294).</b> <b>100%</b> <b>\$294.00</b>			
<b>20. Government and corporate bonds and other negotiable and non-negotiable instruments</b>			
<i>Negotiable instruments</i> include personal checks, cashiers' checks, promissory notes, and money orders. <i>Non-negotiable instruments</i> are those you cannot transfer to someone by signing or delivering them.			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information about them..... Issuer name:			
<b>21. Retirement or pension accounts</b>			
<i>Examples:</i> Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. List each account separately. Type of account: Institution name:			
<b>22. Security deposits and prepayments</b>			
Your share of all unused deposits you have made so that you may continue service or use from a company <i>Examples:</i> Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes..... Institution name or individual:			
<b>23. Annuities</b> (A contract for a specific periodic payment of money to you, either for life or for a number of years)			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes..... Issuer name and description:			
<b>24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.</b>			
26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes..... Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)			
<b>25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit</b>			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Give specific information about them _____			

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property;**

*Examples:* Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them \_\_\_\_\_

**27. Licenses, franchises, and other general intangibles**

*Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them \_\_\_\_\_

**Money or property owed to you?****Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

Federal: \$0.00

State: \$0.00

Local: \$0.00

**29. Family support**

*Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information

Alimony: \$0.00

Maintenance: \$0.00

Support: \$0.00

Divorce settlement: \$0.00

Property settlement: \$0.00

**30. Other amounts someone owes you**

*Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information \_\_\_\_\_

**31. Interests in insurance policies**

*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company of each policy and list its value..... Company name: \_\_\_\_\_

Beneficiary: \_\_\_\_\_

Surrender or refund value: \_\_\_\_\_

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died

No

Yes. Give specific information \_\_\_\_\_

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

*Examples:* Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim..... **Estate of Javaharian and Nasreen Arabi - potential lawsuit for breach of stock redemption agreement.** \_\_\_\_\_

**Unknown**

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No  
 Yes. Describe each claim.....

**35. Any financial assets you did not already list**

No  
 Yes. Give specific information

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**

→ **\$68,544.00**

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.  
 Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

No  
 Yes. Describe..

**39. Office equipment, furnishings, and supplies**

*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No  
 Yes. Describe..

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

No  
 Yes. Describe..

**41. Inventory**

No  
 Yes. Describe..

**42. Interests in partnerships or joint ventures**

No  
 Yes. Describe..... Name of entity: % of ownership:

**43. Customer lists, mailing lists, or other compilations**

No  
 Yes. **Do your lists include personally identifiable information** (as defined in 11 U.S.C. § 101(41A))?  
 No  
 Yes. Describe.....

**44. Any business-related property you did not already list**

No  
 Yes. Give specific information.

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....**

→ **\$0.00**

Debtor 1 Majid  
 First Name Toloui  
 Middle Name   
 Last Name Case number (if known) \_\_\_\_\_

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.**  
**If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.  
 Yes. Go to line 47.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

No  
 Yes....

\_\_\_\_\_

**48. Crops--either growing or harvested**

No  
 Yes. Give specific information.....

\_\_\_\_\_

**49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade**

No  
 Yes....

\_\_\_\_\_

**50. Farm and fishing supplies, chemicals, and feed**

No  
 Yes....

\_\_\_\_\_

**51. Any farm- and commercial fishing-related property you did not already list**

No  
 Yes. Give specific information.....

\_\_\_\_\_

**52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here..... →**

\$0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

No  
 Yes. Give specific information.

**54. Add the dollar value of all of your entries from Part 7. Write that number here..... →**

\$0.00

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2.....	→	\$708,000.00
56. Part 2: Total vehicles, line 5		\$19,000.00
57. Part 3: Total personal and household items, line 15		\$18,500.00
58. Part 4: Total financial assets, line 36		\$68,544.00
59. Part 5: Total business-related property, line 45		\$0.00
60. Part 6: Total farm- and fishing-related property, line 52		\$0.00
61. Part 7: Total other property not listed, line 54	+	\$0.00
62. Total personal property. Add lines 56 through 61.....		\$106,044.00
	Copy personal property total → +	\$106,044.00
63. Total of all property on Schedule A/B. Add line 55 + line 62.....		\$814,044.00

Debtor 1 Majid \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

6. Household goods and furnishings (details):

<b>Household goods &amp; furnishings: Miscellaneous items under \$500 each.</b>	<u>\$15,000.00</u>
<b>Flat screen TV 65"</b>	<u>\$1,000.00</u>

**Fill in this information to identify your case:**

Debtor 1	<b>Majid</b>	<b>Toloui</b>
	First Name	Middle Name
Debtor 2		Last Name
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	<b>EASTERN DISTRICT OF TEXAS</b>	
Case number (if known)		

Check if this is an amended filing

**Official Form 106C****Schedule C: The Property You Claim as Exempt****04/16**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions--such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds--may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? *Check one only, even if your spouse is filing with you.*

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Brief description: <b>4809 Cypress Point Frisco TX 75034</b>	<b>\$708,000.00</b>	<input checked="" type="checkbox"/> <b>\$308,443.77</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Const. art. 16 §§ 50, 51, Texas Prop. Code §§ 41.001-002</b>
Line from <i>Schedule A/B</i> : <b>1.1</b>			
Brief description: <b>2011 S550 Mercedes Benz (approx. 35000 miles)</b>	<b>\$0.00</b>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</b>
Line from <i>Schedule A/B</i> : <b>3.1</b>			

3. Are you claiming a homestead exemption of more than \$160,375?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

Debtor 1 Majid  
First Name      Middle Name Toloui  
Last Name      Case number (if known) \_\_\_\_\_

**Part 2: Additional Page**

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	Check only one box for each exemption
Brief description: <b>2015 Chevy Tahoe</b>	<u>\$0.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</b>
Line from <i>Schedule A/B</i> : <u>3.2</u>			
Brief description: <b>2015 Ford T250 Van (approx. 22000 miles)</b> * This van is owned by Haramian Rugs, Inc. and so listed; however, out of an abundance of caution we are listing this vehicle and loan here based on a potential personal liability / guaranty.	<u>\$19,000.00</u>	<input checked="" type="checkbox"/> <b>\$0.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(9)</b>
Line from <i>Schedule A/B</i> : <u>3.3</u>			
Brief description: <b>Household goods &amp; furnishings:</b> <b>Miscellaneous items under \$500 each.</b>	<u>\$15,000.00</u>	<input checked="" type="checkbox"/> <b>\$15,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Flat screen TV 65"</b>	<u>\$1,000.00</u>	<input checked="" type="checkbox"/> <b>\$1,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(1)</b>
Line from <i>Schedule A/B</i> : <u>6</u>			
Brief description: <b>Wearing Apparel: Miscellaneous items under \$500 each.</b>	<u>\$500.00</u>	<input checked="" type="checkbox"/> <b>\$500.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(5)</b>
Line from <i>Schedule A/B</i> : <u>11</u>			
Brief description: <b>Jewelry: Miscellaneous items under \$500 each.</b>	<u>\$2,000.00</u>	<input checked="" type="checkbox"/> <b>\$2,000.00</b> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<b>Tex. Prop. Code §§ 42.001(a), 42.002(a)(6)</b>
Line from <i>Schedule A/B</i> : <u>12</u>			

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

**2. List all secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A <b>Amount of claim</b> Do not deduct the value of collateral	Column B <b>Value of collateral that supports this claim</b>	Column C <b>Unsecured portion</b> If any
---	---	--

2.1	Describe the property that secures the claim:  <u>Ally Financial</u> Creditor's name <u>Attn: Bankruptcy Dept.</u> Number Street <u>PO Box 380902</u>	\$47,252.00	\$0.00	\$47,252.00
-----	---	-------------	--------	-------------

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset)

**Certificate of Title**

**Who owes the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$47,252.00

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Additional Page**

**Part 1:** After listing any entries on this page, number them sequentially from the previous page.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral	Value of collateral that supports this claim	Unsecured portion If any

2.2	Describe the property that secures the claim:	\$22,000.00	\$19,000.00	\$3,000.00
-----	---	-------------	-------------	------------

**Ford Credit**  
 Creditor's name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 650575**

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Certificate of Title**

**Dallas TX 75265**  
 City State ZIP Code

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

2.3	Describe the property that secures the claim:	\$364,556.23	\$708,000.00	
-----	---	--------------	--------------	--

**Ocwen Loan Servicing, LLC**  
 Creditor's name  
**PO Box 24738**  
 Number Street

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
- Statutory lien (such as tax lien, mechanic's lien)
- Judgment lien from a lawsuit
- Other (including a right to offset)

**Deed of Trust**

**West Palm Beach FL 33416-4738**  
 City State ZIP Code

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim relates to a community debt

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$386,556.23**

Debtor 1 Majid Middle Name Toloui Last Name Case number (if known) \_\_\_\_\_

Part 1:	Additional Page After listing any entries on this page, number them sequentially from the previous page.	Column A Amount of claim Do not deduct the value of collateral	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
---------	---	--	--	---

2.4	Describe the property that secures the claim:	\$46,960.00	\$0.00	\$46,960.00
<b>Santander Consumer USA Inc.</b> Creditor's name <b>8585 N. Stemmons Frwy, Ste. 1100-N</b> Number Street				

Dallas	TX	75247-3822	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt**

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

2.5	Describe the property that secures the claim:	\$35,000.00	\$708,000.00	
-----	---	-------------	--------------	--

<b>Wells Fargo</b> Creditor's name <b>One Home Campus BK PMT PROC</b> Number Street <b>MAC #X2302-04C</b>					
---	--	--	--	--	--

As of the date you file, the claim is: Check all that apply.					
--	--	--	--	--	--

Des Moines	IA	50328	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

**Who owes the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim relates to a community debt**

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here:

\$81,960.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$515,768.23

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Hold Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

**Part 1: List All of Your PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total claim	Priority amount	Nonpriority amount
\$20,800.00	\$0.00	\$20,800.00

2.1

**INTERNAL REVENUE SERVICE**

Priority Creditor's Name

**CENTRALIZED INSOLVENCY OPERATIONS**

Number Street

PO Box 7346

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

**Haramian Rugs Inc. 941 liability (disputed)****Type of PRIORITY unsecured claim:**

Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: List All of Your NONPRIORITY Unsecured Claims

### 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

### 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.

If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If more space is needed for nonpriority unsecured claims, fill out the Continuation Page of Part 2.

**Total claim**

**4.1** **\$473.00**

**ADT Security Services**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 371878**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Non Consumer Debt**

**Pittsburgh PA 15250**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

**4.2** **\$3,023.00**

**All State Insurance**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 650271**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify  
**Unsecured Consumer Debt**

**Dallas TX 75265**

City State ZIP Code

Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.3** **\$3,148.02**

**Alma Animal Hospital**  
 Nonpriority Creditor's Name  
**808 S. Alma Dr.**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Allen TX 75013**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**4.4** **\$66,579.00**

**American Express Centurion Bank**  
 Nonpriority Creditor's Name  
**c/o Zwicker & Associates, P.C.**  
 Number Street  
**Attn: Troy Bolen**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Old Town Square, 1 Chisolm Trail STE 301**  
 Round Rock TX 78681  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Debt**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid**  
First Name      Middle Name **Toloui**  
Last Name      Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.5** **\$4,000.00**

### Armen Oriental Rug Cleaning Co. Inc.

Nonpriority Creditor's Name

**4743 Carol Lane**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75247**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.

**4.6**

**\$450.00**

### Assurant Health

Nonpriority Creditor's Name

**PO Box 624**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Milwaukee WI 53201**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

Debtor 1 Majid Middle Name Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.7		\$0.00
<b>AT&amp;T</b>		Last 4 digits of account number _____
Nonpriority Creditor's Name <b>Attn: Bankruptcy Dept.</b>		When was the debt incurred? _____
Number Street <b>PO Box 5017</b>		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Carol Stream IL 60197</b>		Type of NONPRIORITY unsecured claim:
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Non Consumer Debt</b>
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input checked="" type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
<b>Debt of Persepolis listed here out of an abundance of caution.</b>		
4.8		\$847.00
<b>AT&amp;T Mobility</b>		Last 4 digits of account number _____
Nonpriority Creditor's Name <b>PO Box 6463</b>		When was the debt incurred? _____
Number Street		As of the date you file, the claim is: Check all that apply.
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Carol Stream IL 60197</b>		Type of NONPRIORITY unsecured claim:
City State ZIP Code		<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <b>Unsecured Consumer Debt</b>
<b>Who incurred the debt?</b> Check one.		
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another		
<input type="checkbox"/> Check if this claim is for a community debt		
Is the claim subject to offset?		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.9** **\$993.11**

**BlueCross BlueShield of Texas**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 3239**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Naperville IL 60566**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

**\$3,515.00**

**Careflite**  
 Nonpriority Creditor's Name  
**c/o CMC Collections Dept.**  
 Number Street  
**Attn: Bankruptcy Dept.**  
**PO Box 660911**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75266-0911**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

**\$500.00**

**Chase**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**Mail Code LA4-5555**  
**700 Kansas Lane**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Monroe LA 71203**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Unsecured Consumer Debt**

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.12

**\$359.00**

**Chase - Slate**  
 Nonpriority Creditor's Name  
**PO Box 94014**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Palatine IL 60094-4014**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Is the claim subject to offset?

- No
- Yes

4.13

**\$82.42**

**Children's Health**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**1935 Medical District Dr.**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75235**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical**

Is the claim subject to offset?

- No
- Yes

4.14

**\$650.00**

**City of Frisco**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO box 203598**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75320**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.15** **\$22,322.50**

**Click4Corp**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 207**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Allen** TX **75013**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

**4.16** **\$624.65**

**Collin Central Appraisal District**  
 Nonpriority Creditor's Name  
**250 W. Eldorado Pkwy**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**McKinney** TX **75069-0000**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Taxes**

Is the claim subject to offset?

- No
- Yes

**Business Personal Property Tax Haramian Rugs Inc.**

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.17** **\$2,554.00**

**Colonial County Mutual Insurance Company**

Nonpriority Creditor's Name

c/o Driskell & Wright

Number Street

**105 Decker Court STE 150**

**Irving TX 75062**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

**\$601.00**

**Continental Exchange Solutions, Inc.**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street

**7001 Villague Dr. STE 200**

**Buena Park CA 90621**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Non Consumer Debt**

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

Debtor 1 Majid Middle Name Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.19

\$381.00

### Credit Collection Services

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street

**725 Canton St.**

**Norwood MA 02062**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

4.20

\$6,000.00

### Dallas Morning News

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street

**508 Young St.**

**Dallas TX 75202**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.

Debtor 1 **Majid**  
First Name      Middle Name **Toloui**  
Last Name      Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.21** **\$4,400.00**

**Desi Yellow Pages LLC**

Nonpriority Creditor's Name

**d/b/a B Magazine**

Number Street

**c/o Farrah I. Ahmed, PLLC**

**13140 Coit Rd. Ste 350**

**Dallas TX 75240**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

**4.22** **\$8,382.00**

**Discover Bank / Financial Services**

Nonpriority Creditor's Name

**PO Box 6103**

Number Street

**Carol Stream IL 60197-6103**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed
- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Unsecured Business Debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Unsecured Consumer Debt**

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.23** **\$23,248.00**

**Ebisons Harounian Imports**  
 Nonpriority Creditor's Name  
**389 Fifth Ave. Ste 508**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**New York NY 10016**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Business Debt**

Is the claim subject to offset?

- No
- Yes

Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.

**4.24** **\$8,300.00**

**Elavon, Inc.**  
 Nonpriority Creditor's Name  
**c/o Barnett & Garcia**  
 Number Street  
**3821 Juniper Trace, STE 108**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Austin TX 78738**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Non Consumer Debt**

Is the claim subject to offset?

- No
- Yes

Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.25

\$1,235.00

**Evnision Healthcare**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 847925**

**Dallas** TX **75284**  
 City State ZIP Code

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

4.26

\$230.00

**Farmers Insurance**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**15700 Long Cista Dr.**

**Austin** TX **78728**  
 City State ZIP Code

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Unsecured Consumer Debt**

4.27

\$518.00

**Frisco Emergency Medicine Associates**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 12872**

**Oklahoma City** OK **73157**  
 City State ZIP Code

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

Debtor 1 **Majid**  
First Name      Middle Name **Toloui**  
Last Name      Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim \_\_\_\_\_

4.28

**\$1,200.00**

**Frisco Impact News**  
Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
Number Street  
**16225 Impact Way, Ste. 1**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Pflugerville TX 78660**  
City      State      ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Who incurred the debt? Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?  
 No  
 Yes

Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.

4.29

**\$4,173.93**

**Frisco ISD Tax Office**  
Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
Number Street  
**6948 Maple Street**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Frisco TX 75034**  
City      State      ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Who incurred the debt? Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?  
 No  
 Yes

Business property tax of Haramian Rugs, Inc. listed here out of an abundance of caution.

Debtor 1 Majid Middle Name Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.30** **\$3,000.00**

**Frisco Style Magazine**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**7790 Main St, Frisco**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Frisco TX 75033**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

**4.31** **\$601.34**

**Geico Insurance / Mutual**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**One Geico Plaza**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Bethesda MD 20811-0001**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Unsecured Consumer Debt**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.32** **\$2,592.00**

**H.M. Nabarian & Sons, Inc.**  
 Nonpriority Creditor's Name  
**36 E. 31st. St.**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**New York NY 10016**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**Debt of Persepolis listed here out of an abundance of caution.**

**4.33** **\$26.31**

**Harold Neil Jacobsen MD**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**17440 Dallas Pkwy STE 208**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75287**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.34

\$23,401.00

**Harounian Rugs Intl.**  
 Nonpriority Creditor's Name  
**261 Fifth Ave.**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**New York NY 10016**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Notice Only**

4.35

\$442.00

**Harris Methodist Hospital**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 916060**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Fort Worth TX 76191**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

4.36

\$2,900.00

**Hudson Law Firm, P.C.**  
 Nonpriority Creditor's Name  
**1846 E. Rosemeade Pkwy STE 239**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Carrollton TX 75007**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Debtor 1 Majid Middle Name Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.37** \$12,015.75

**Improvement Services, Inc.**  
 Nonpriority Creditor's Name  
**dba Imburgia Construction**  
 Number Street  
**211 Elvis Presly Ln.**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

**Rockwall TX 75032**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

**4.38** \$883.00

**Jaunty Co., Inc.**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**13535 S. Figueroa Street**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

**Los Angeles CA 90061**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

**Debt of Persepolis listed here out of an abundance of caution.**

Debtor 1 Majid Middle Name Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.39

\$382.00

**Labcorp**  
 Nonpriority Creditor's Name  
**PO Box 2240**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Burlington**      **NC**      **27216**  
 City                State        ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical**

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.40

\$114.00

**Lee Dental**  
 Nonpriority Creditor's Name  
**6351 Preston Rd. STE 300**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Frisco**      **TX**      **75034**  
 City                State        ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical**

Is the claim subject to offset?

- No
- Yes

4.41

\$1,310.00

**Leo's Landscape**  
 Nonpriority Creditor's Name  
**2705 W. Ledbetter Rd.**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas**      **TX**      **75233**  
 City                State        ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.42

**\$87.45**

**MD Pathology**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 671002**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical**

**Dallas TX 75267**  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.43

**\$1,500,000.00**

**Nasrene Arabi**  
 Nonpriority Creditor's Name  
**60-24 255th Street**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Business Debt.**

**Little Neck NY 11362**  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

4.44

**\$1,800.00**

**North Texas Tollway Authority**  
 Nonpriority Creditor's Name  
**PO Box 660244**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

**Plano TX 75026**  
 City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid**  
 First Name **Toloui**  
 Middle Name **Last Name** Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

4.45

\$1,026.00

**Progressive County Mutual Insurance**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street  
**PO Box 650201**

**Dallas TX 75265**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

4.46

\$16.75

**Propath Associates**

Nonpriority Creditor's Name

**Dept. 41070**

Number Street  
**Attn: Bankruptcy Dept**

**PO Box 660811**

**Dallas TX 75266-0811**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

4.47

\$50.00

**Ria**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street  
**77001 Village Dr. STE 200**

**Buena Park CA 90621**

City State ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

4.48

**\$297.00**

**Robson Communities, Inc.**

Nonpriority Creditor's Name

**9532 E. Riggs Rd.**

Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Chandler AZ 85248**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debt of Persepolis listed here out of an abundance of caution.

4.49

**\$11,942.00**

**Shafer Property Company**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street

**7015 Snider Plaza, Suite 207**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75205**

City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

**Total claim**

**4.50** **\$4,014.00**

**Synchrony Bank**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 960061**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Orlando FL 32869-0061**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**4.51** **\$2,000.00**

**Texas Carpet Binding**  
 Nonpriority Creditor's Name  
**17811 Davenport Rd. STE 18**  
 Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75252**  
 City State ZIP Code

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Non Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

Debtor 1 **Majid**  
First Name      Middle Name **Toloui**  
Last Name      Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.52** **\$5,094.00**

**Texas Comptroller of Public Accounts**

Nonpriority Creditor's Name

**Attn: Bankruptcy Dept.**

Number Street  
**PO Box 149359**

**Austin TX 78714**

City      State      ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

**4.53** **\$2,410.00**

**Texas Medicine Resources**

Nonpriority Creditor's Name

**PO Box 8549**

Number Street

**Fort Worth TX 76124**

City      State      ZIP Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**

**Is the claim subject to offset?**

- No
- Yes

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Taxes**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Medical**

Debtor 1 **Majid**  
First Name      Middle Name **Toloui**  
Last Name      Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

**4.54** **\$75,000.00**

**Thompson & Knight**  
Nonpriority Creditor's Name  
**Attn: Ron Firestone collection coordinat**  
Number Street  
**PO Box 660684**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75266-0684**  
City      State      ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Business Debt**

### Possible unpaid legal fees in defense of Arabi v. Haramian Rugs, Inc. et. al.

**4.55** **\$802.00**

**Time Warner Cable**  
Nonpriority Creditor's Name  
**PO Box 650063**  
Number Street

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75265-0063**  
City      State      ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Debtor 1 Majid Middle Name Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim

\$222.45

**4.56** Uline Last 4 digits of account number \_\_\_\_\_  
 Nonpriority Creditor's Name When was the debt incurred? \_\_\_\_\_  
Attn: Bankruptcy Dept. As of the date you file, the claim is: Check all that apply.  
 Number Street  
PO Box 88741  Contingent  
 Unliquidated  
 Disputed

**Chicago** IL 60680 City State ZIP Code

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Non Consumer Debt**

Is the claim subject to offset?

- No
- Yes

**Debt of Haramian Rugs, Inc. listed here out of an abundance of caution.**

**\$1,000.00**

**4.57** United Health Care Last 4 digits of account number \_\_\_\_\_  
 Nonpriority Creditor's Name When was the debt incurred? \_\_\_\_\_  
c/o Balekian Hayes, PLLC As of the date you file, the claim is: Check all that apply.  
 Number Street  
4144 N. Central Expy STE 1200  Contingent  
 Unliquidated  
 Disputed

**Dallas** TX 75204 City State ZIP Code

**Who incurred the debt?** Check one.  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify  
**Unsecured Consumer Debt**

Is the claim subject to offset?

- No
- Yes

Debtor 1 **Majid**  
 First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

## Part 2: Your NONPRIORITY Unsecured Claims -- Continuation Page

After listing any entries on this page, number them sequentially from the previous page.

Total claim \_\_\_\_\_

4.58

\$431.00

**UT Southwestern Medical Center**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 848009**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Dallas TX 75284**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Medical**

4.59

\$8,097.70

**Warmbrodt, Winslow & Asst.**  
 Nonpriority Creditor's Name  
**Attn: Randall Warmbrodt**  
 Number Street  
**One Allen Center**  
**700 Central Expy STE 150**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Allen TX 75013**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

4.60

\$2,635.00

**Wells Fargo Card Services**  
 Nonpriority Creditor's Name  
**Attn: Bankruptcy Dept.**  
 Number Street  
**PO Box 51193**

Last 4 digits of account number \_\_\_\_\_

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply.

- Contingent
- Unliquidated
- Disputed

**Los Angeles CA 90051-5493**  
 City State ZIP Code

Who incurred the debt? Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt

Is the claim subject to offset?

- No
- Yes

Type of NONPRIORITY unsecured claim:

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts
- Other. Specify **Unsecured Consumer Debt**

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional parties to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

<b>ARSI</b>	On which entry in Part 1 or Part 2 did you list the original creditor?		
Name <b>Attn: Bankruptcy Dept.</b>	Line <u>4.4</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street <b>555 St. Charles Dr. Suite 100</b>			
<b>Last 4 digits of account number</b> _____			
<b>Thousand Oaks</b>	<b>CA</b>	<b>91360</b>	
City	State	ZIP Code	
<b>Call Isaacks Gordon &amp; Roberts PC</b> On which entry in Part 1 or Part 2 did you list the original creditor?			
Name <b>Attn: David B. McCall</b>	Line <u>4.29</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street <b>777 E. 15th Street</b>			
<b>Last 4 digits of account number</b> _____			
<b>Plano</b>	<b>TX</b>	<b>75074</b>	
City	State	ZIP Code	
<b>Cash LLC c/o Michael J. Scott, PC</b> On which entry in Part 1 or Part 2 did you list the original creditor?			
Name <b>PO Box 115220</b>	Line _____ of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <b>Unsecured Consumer Debt</b> <input type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street			
<b>Last 4 digits of account number</b> _____			
<b>Carrollton</b>	<b>TX</b>	<b>75011</b>	
City	State	ZIP Code	
<b>Credit Collection Services</b> On which entry in Part 1 or Part 2 did you list the original creditor?			
Name <b>PO Box 55126</b>	Line <u>4.31</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street			
<b>Last 4 digits of account number</b> _____			
<b>Boston</b>	<b>MA</b>	<b>02205</b>	
City	State	ZIP Code	
<b>Credit Collection Services</b> On which entry in Part 1 or Part 2 did you list the original creditor?			
Name <b>PO Box 55126</b>	Line <u>4.17</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims		
Number Street			
<b>Last 4 digits of account number</b> _____			
<b>Boston</b>	<b>MA</b>	<b>02205</b>	
City	State	ZIP Code	

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Credit Collection Services** On which entry in Part 1 or Part 2 did you list the original creditor?

Name PO Box 55126 Line 4.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street  Part 2: Creditors with Nonpriority Unsecured Claims

Boston MA 02205 Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Dan & Kathy Yost** On which entry in Part 1 or Part 2 did you list the original creditor?

Name c/o M. Drew Siegel & Asst. Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street 1620 Beltline Rd. Suite 201 Unsecured Business  Part 2: Creditors with Nonpriority Unsecured Claims  
Debt

Carrollton TX 75006 Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Degrasse & Rolnick** On which entry in Part 1 or Part 2 did you list the original creditor?

Name Attn: Donald D. DeGrasse Line 4.4 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street 1800 Bering, Suite 1000  Part 2: Creditors with Nonpriority Unsecured Claims

Houston TX 77057 Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Eastern Account System of Conn. Inc.** On which entry in Part 1 or Part 2 did you list the original creditor?

Name PO Box 837 Line 4.55 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street  Part 2: Creditors with Nonpriority Unsecured Claims

Newtown CT 06470 Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Eaton & Van Winkle LLP** On which entry in Part 1 or Part 2 did you list the original creditor?

Name Attn: Lawrence A. Steckman, Esq. Line 4.43 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street 3 Park Ave. 16th Floor  Part 2: Creditors with Nonpriority Unsecured Claims

New York NY 10016 Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Estate of Ali Javaharian** On which entry in Part 1 or Part 2 did you list the original creditor?

Name c/o Dan E. Martens, Esq. Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Number Street 17101 Preston Road, Suite 160  Part 2: Creditors with Nonpriority Unsecured Claims

Dallas TX 75248 Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

<u>James A. Frazier</u> Name <u>One Allen Center</u> Number Street <u>700 Central Expy S. STE 150</u>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.59</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
<u>Allen</u> TX <u>75013</u> City State ZIP Code	Last 4 digits of account number _____
<u>Kaufman &amp; Kahn</u> Name <u>Attn: Mark Kaufman</u> Number Street <u>747 Third Avenue, 32nd Floor</u>	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.43</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
<u>New York</u> NY <u>10017</u> City State ZIP Code	Last 4 digits of account number _____
<u>LCA Collections</u> Name <u>PO Box 2240</u> Number Street	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.39</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
<u>Burlington</u> NC <u>27216</u> City State ZIP Code	Last 4 digits of account number _____
<u>Linebarger Goggan Blair &amp; Sampson, LLP</u> Name <u>2777 N. Stemmons Fwy STE 1000</u> Number Street	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.16</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
<u>Dallas</u> TX <u>75207</u> City State ZIP Code	Last 4 digits of account number _____
<u>Merhcant Services Collection Dept.</u> Name <u>PO Box 9599</u> Number Street	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.24</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
<u>Knoxville</u> TN <u>37940</u> City State ZIP Code	Last 4 digits of account number _____
<u>Professional Account Management, LLC</u> Name <u>PO Box 866608</u> Number Street	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.44</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
<u>Plano</u> TX <u>75086</u> City State ZIP Code	Last 4 digits of account number _____

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 3: List Others to Be Notified About a Debt That You Already Listed -- Continuation Page**

**Richard D. Pullman Esq.** On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_ Line 4.49 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
**Kessler & Collins, P.C.**  Part 2: Creditors with Nonpriority Unsecured Claims  
 Number Street  
**2100 Ross Avenue, Suite 750**

**Dallas** TX **75201** Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Soraya Javaherian** On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_ Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
**4512 Salerno Cir.**  Part 2: Creditors with Nonpriority Unsecured Claims  
 Number Street  
**Non Consumer Debt**

**Plano** TX **75093** Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**The Abramson Law Group, PLLC** On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_ Line 4.43 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
**Attn: Mitchell B. Schekman, Esq.**  Part 2: Creditors with Nonpriority Unsecured Claims  
 Number Street  
**570 Lexington Ave. 23rd Floor**

**New York** NY **10022** Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**United Revenue Corp** On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_ Line 4.53 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
**Attn: Bankruptcy Dept.**  Part 2: Creditors with Nonpriority Unsecured Claims  
 Number Street  
**204 Billings Suite 120**

**Arlington** TX **76010-0000** Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Wright Ginsberg Brusilow PC** On which entry in Part 1 or Part 2 did you list the original creditor?

Name \_\_\_\_\_ Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
**14755 Preston Road, STE 660**  Part 2: Creditors with Nonpriority Unsecured Claims  
 Number Street  
**Non Consumer Debt**

**Dallas** TX **75254** Last 4 digits of account number \_\_\_\_\_  
 City State ZIP Code

**Debt of Persepolis Oriental Rug of Dallas, Inc.** listed here out of an abundance of caution.

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only.  
 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	Total claim
6a. Domestic support obligations	6a. <u>\$0.00</u>
6b. Taxes and certain other debts you owe the government	6b. <u>\$20,800.00</u>
6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$0.00</u>
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + <u>\$0.00</u>
6e. Total. Add lines 6a through 6d.	<u><b>\$20,800.00</b></u>

Total claims from Part 2	Total claim
6f. Student loans	6f. <u>\$0.00</u>
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. <u>\$0.00</u>
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. <u>\$0.00</u>
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + <u><b>\$1,833,382.38</b></u>
6j. Total. Add lines 6f through 6i.	<u><b>\$1,833,382.38</b></u>

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

**1. Do you have any executory contracts or unexpired leases?**

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).

**2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<u>Shafer Plaza 06 A, LLC</u> Name <u>c/o Richard D. Pullman Kesller &amp; Collins</u> Number Street <u>2100 Ross Ave. Suite 750</u>	<u>Listed out of an abundance of caution (not in debtor's name personally) based on any potential liability for commercial lease to Haramian Rugs, Inc. or Persepolis Oriental Rugs of Dallas, Inc.</u> Contract to be REJECTED
	<u>Dallas</u> City	<u>TX</u> State <u>75201</u> ZIP Code

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106H****Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. **Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. **Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?  
 No  
 Yes

In which community state or territory did you live? Texas Fill in the name and current address of that person.

**Fatemh Toloui**

Name of your spouse, former spouse, or legal equivalent

**4809 Cypress Point**

Number Street

**Frisco****TX****75034**

City

State

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.2  
 Schedule G, line \_\_\_\_\_

**All State Insurance**

3.1

**Toloui, Fatameh**

Name

**4809 Cypress Point**

Number Street

**Frisco****TX****75034**

City

State

ZIP Code

Debtor 1 **Majid Toloui** Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

### Additional Page to List More Codebtors

**Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.2

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.4** Schedule G, line \_\_\_\_\_**American Express Centurion Bank**

3.3

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **5.1** Schedule G, line \_\_\_\_\_**ARSI**

3.4

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.17** Schedule G, line \_\_\_\_\_**Colonial County Mutual Insurance Company**

3.5

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.22** Schedule G, line \_\_\_\_\_**Discover Bank / Financial Services**

3.6

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **5.9** Schedule G, line \_\_\_\_\_**Eastern Account System of Conn. Inc.**

3.7

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.25** Schedule G, line \_\_\_\_\_**Evision Healthcare**

3.8

**Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street**Frisco**  
City**TX**  
State**75034**  
ZIP Code Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.26** Schedule G, line \_\_\_\_\_**Farmers Insurance**

Debtor 1 **Majid Toloui**  
 First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.9 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.27** Schedule G, line \_\_\_\_\_**Frisco Emergency Medicine Associates**3.10 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.31** Schedule G, line \_\_\_\_\_**Geico Insurance / Mutual**3.11 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.33** Schedule G, line \_\_\_\_\_**Harold Neil Jacobsen MD**3.12 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.35** Schedule G, line \_\_\_\_\_**Harris Methodist Hospital**3.13 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.39** Schedule G, line \_\_\_\_\_**Labcorp**3.14 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **5.14** Schedule G, line \_\_\_\_\_**LCA Collections**3.15 **Toloui, Fatameh**Name  
**4809 Cypress Point**  
Number Street Schedule D, line \_\_\_\_\_ Schedule E/F, line **4.41** Schedule G, line \_\_\_\_\_**Leo's Landscape**

Debtor 1 **Majid Toloui**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.16 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 5.15 Schedule G, line \_\_\_\_\_**Linebarger Goggan Blair & Sampson, LLP**

3.17 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.42 Schedule G, line \_\_\_\_\_**MD Pathology**

3.18 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line 2.3 Schedule E/F, line \_\_\_\_\_ Schedule G, line \_\_\_\_\_**Ocwen Loan Servicing, LLC**

3.19 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.45 Schedule G, line \_\_\_\_\_**Progressive County Mutual Insurance**

3.20 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.53 Schedule G, line \_\_\_\_\_**Texas Medicine Resources**

3.21 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.57 Schedule G, line \_\_\_\_\_**United Health Care**

3.22 **Toloui, Fatameh**  
 Name \_\_\_\_\_

**4809 Cypress Point**

Number Street \_\_\_\_\_

**Frisco TX 75034**  
 City State ZIP Code

 Schedule D, line \_\_\_\_\_ Schedule E/F, line 4.58 Schedule G, line \_\_\_\_\_**UT Southwestern Medical Center**



Debtor 1	<b>Majid</b>	<b>Toloui</b>	Case number (if known)	
	First Name	Middle Name	Last Name	
			<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
<b>Copy line 4 here .....</b>		→ 4.	<b>\$0.00</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>				
5a. Tax, Medicare, and Social Security deductions		5a.	<b>\$0.00</b>	<b>\$0.00</b>
5b. Mandatory contributions for retirement plans		5b.	<b>\$0.00</b>	<b>\$0.00</b>
5c. Voluntary contributions for retirement plans		5c.	<b>\$0.00</b>	<b>\$0.00</b>
5d. Required repayments of retirement fund loans		5d.	<b>\$0.00</b>	<b>\$0.00</b>
5e. Insurance		5e.	<b>\$0.00</b>	<b>\$0.00</b>
5f. Domestic support obligations		5f.	<b>\$0.00</b>	<b>\$0.00</b>
5g. Union dues		5g.	<b>\$0.00</b>	<b>\$0.00</b>
5h. Other deductions. Specify: _____		5h. +	<b>\$0.00</b>	<b>\$0.00</b>
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.		6.	<b>\$0.00</b>	<b>\$0.00</b>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.		7.	<b>\$0.00</b>	<b>\$0.00</b>
<b>8. List all other income regularly received:</b>				
8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		8a.	<b>\$10,000.00</b>	<b>\$0.00</b>
8b. Interest and dividends		8b.	<b>\$0.00</b>	<b>\$0.00</b>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive  Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		8c.	<b>\$0.00</b>	<b>\$0.00</b>
8d. Unemployment compensation		8d.	<b>\$0.00</b>	<b>\$0.00</b>
8e. Social Security		8e.	<b>\$0.00</b>	<b>\$0.00</b>
8f. Other government assistance that you regularly receive  Include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: _____		8f.	<b>\$0.00</b>	<b>\$0.00</b>
8g. Pension or retirement income		8g.	<b>\$0.00</b>	<b>\$0.00</b>
8h. Other monthly income. Specify: _____		8h. +	<b>\$0.00</b>	<b>\$0.00</b>
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.		9.	<b>\$10,000.00</b>	<b>\$0.00</b>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		10.	<b>\$10,000.00</b>	<b>+ \$0.00 = \$10,000.00</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.				
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.				
Specify: _____		11. +	<b>\$0.00</b>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies.		12.	<b>\$10,000.00</b>	<b>Combined monthly income</b>
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>				
<input type="checkbox"/> No.	<b>Debtor's income has fallen due to the failure of his business. He continues selling rugs for his brother and hopes to earn enough commission to continue in his current home.</b>			
<input checked="" type="checkbox"/> Yes. Explain:				

Debtor 1 Majid \_\_\_\_\_ Case number (if known) \_\_\_\_\_  
First Name Middle Name Last Name

8a. Attached Statement (Debtor 1)

**Carpet Sales**

**Gross Monthly Income:** \_\_\_\_\_ **\$10,000.00**

Expense \_\_\_\_\_ Category \_\_\_\_\_ Amount \_\_\_\_\_

**Total Monthly Expenses** \_\_\_\_\_ **\$0.00**

**Net Monthly Income:** \_\_\_\_\_ **\$10,000.00**

**Fill in this information to identify your case:**

Debtor 1	<b>Majid</b> First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

**Official Form 106J****Schedule J: Your Expenses****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household****1. Is this a joint case?**

No. Go to line 2.  
 Yes. **Does Debtor 2 live in a separate household?**  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

**2. Do you have dependents?**

Do not list Debtor 1 and Debtor 2.

 No Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
daughter	17	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes
		<input type="checkbox"/> No <input type="checkbox"/> Yes

**3. Do your expenses include expenses of people other than yourself and your dependents?**

No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

	<u>Your expenses</u>
<b>4. The rental or home ownership expenses for your residence.</b> Include first mortgage payments and any rent for the ground or lot.	4. <u>\$3,910.60</u>
<b>If not included in line 4:</b>	
4a. Real estate taxes	4a. _____
4b. Property, homeowner's, or renter's insurance	4b. _____
4c. Home maintenance, repair, and upkeep expenses	4c. <u>\$150.00</u>
4d. Homeowner's association or condominium dues	4d. <u>\$180.00</u>

Debtor 1	<b>Majid</b>	<b>Toloui</b>	Case number (if known)
	First Name	Middle Name	Last Name
<b>Your expenses</b>			
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans		
6.	<b>Utilities:</b>		
6a.	Electricity, heat, natural gas		
6b.	Water, sewer, garbage collection		
6c.	Telephone, cell phone, Internet, satellite, and cable services		
6d.	Other. Specify: _____		
7.	<b>Food and housekeeping supplies</b>		
8.	<b>Childcare and children's education costs</b>		
9.	<b>Clothing, laundry, and dry cleaning</b>		
10.	<b>Personal care products and services</b>		
11.	<b>Medical and dental expenses</b>		
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.		
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>		
14.	<b>Charitable contributions and religious donations</b>		
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a.	Life insurance		
15b.	Health insurance		
15c.	Vehicle insurance		
15d.	Other insurance. Specify: _____		
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____		
17.	<b>Installment or lease payments:</b>		
17a.	Car payments for Vehicle 1 <b>2011 Mercedes</b>		
17b.	Car payments for Vehicle 2 <b>2015 Ford T250 Van</b>		
17c.	Other. Specify: _____		
17d.	Other. Specify: _____		
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>		
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____		

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**

20a. Mortgages on other property	20a. _____
20b. Real estate taxes	20b. _____
20c. Property, homeowner's, or renter's insurance	20c. _____
20d. Maintenance, repair, and upkeep expenses	20d. _____
20e. Homeowner's association or condominium dues	20e. _____

**21. Other.** Specify: \_\_\_\_\_

21. + \_\_\_\_\_

**22. Calculate your monthly expenses.**

22a. Add lines 4 through 21.	22a. _____ \$9,613.78
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b. _____
22c. Add line 22a and 22b. The result is your monthly expenses.	22c. _____ \$9,613.78

**23. Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$10,000.00
23b. Copy your monthly expenses from line 22c above.	23b. - _____ \$9,613.78
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. _____ \$386.22

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:  
**None.**

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

**Part 1: Summarize Your Assets**

**Your assets**  
Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B.....	<u>\$708,000.00</u>
1b. Copy line 62, Total personal property, from Schedule A/B.....	<u>\$106,044.00</u>
1c. Copy line 63, Total of all property on Schedule A/B.....	<u><b>\$814,044.00</b></u>

**Part 2: Summarize Your Liabilities**

**Your liabilities**  
Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.....	<u>\$515,768.23</u>
---	---------------------

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	<u>\$20,800.00</u>
---	--------------------

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	+ <u>\$1,833,382.38</u>
--	-------------------------

**Your total liabilities**

**\$2,369,950.61**

**Part 3: Summarize Your Income and Expenses**4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I.....	<u>\$10,000.00</u>
---	--------------------

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J.....	<u>\$9,613.78</u>
---	-------------------

Debtor 1 **Majid Toloui**  
 First Name Middle Name Last Name Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records**

**6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

**Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.  
 **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:**

**Total claim**

**From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations. (Copy line 6a.) \_\_\_\_\_

9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \_\_\_\_\_

9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \_\_\_\_\_

9d. Student loans. (Copy line 6f.) \_\_\_\_\_

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \_\_\_\_\_

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \_\_\_\_\_

9g. **Total.** Add lines 9a through 9f.

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Sign Below**

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Majid Toloui

Majid Toloui, Debtor 1

Date 07/11/2016

MM / DD / YYYY

X \_\_\_\_\_

Signature of Debtor 2

Date

MM / DD / YYYY

**Fill in this information to identify your case:**

Debtor 1	<u>Majid</u> First Name	<u>Toloui</u> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>EASTERN DISTRICT OF TEXAS</u>			
Case number (if known)			

Check if this is an amended filing

**Official Form 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy**

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

Married  
 Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory?**

(Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 Majid  
 First Name Toloui  
 Middle Name   
 Last Name Case number (if known) \_\_\_\_\_

## Part 2: Explain the Sources of Your Income

### 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

### 5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

## Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

### 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
<b>Ocwen Loan Servicing, LLC</b> Creditor's name		<b>\$7,821.20</b>	<b>\$364,556.23</b>	<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____
<b>PO Box 24738</b> Number Street				
<b>West Palm Beach</b> City	<b>FL</b> State	<b>33416-4738</b> ZIP Code		

Debtor 1	<b>Majid</b> First Name	<b>Toloui</b> Middle Name	<b>Last Name</b>	Case number (if known)
		Dates of payment	Total amount paid	Amount you still owe
			<b>\$1,080.00</b>	<b>\$47,252.00</b>
<b>Ally Financial</b> Creditor's name <b>Attn: Bankruptcy Dept.</b> Number Street <b>PO Box 380902</b>				
<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____				
	<b>Minneapolis</b> City	<b>MN</b> State	<b>55438</b> ZIP Code	
		Dates of payment	Total amount paid	Amount you still owe
			<b>\$1,479.54</b>	<b>\$22,000.00</b>
<b>Ford Credit</b> Creditor's name <b>Attn: Bankruptcy Dept.</b> Number Street <b>PO Box 650575</b>				
<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____				
	<b>Dallas</b> City	<b>TX</b> State	<b>75265</b> ZIP Code	
		Dates of payment	Total amount paid	Amount you still owe
			<b>\$2,535.00</b>	<b>\$46,960.00</b>
<b>Santander Consumer USA Inc.</b> Creditor's name <b>8585 N. Stemmons Frwy, Ste. 1100-N</b> Number Street				
<input type="checkbox"/> Mortgage <input checked="" type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____				
	<b>Dallas</b> City	<b>TX</b> State	<b>75247-3822</b> ZIP Code	
		Dates of payment	Total amount paid	Amount you still owe
			<b>\$1,200.00</b>	<b>\$35,000.00</b>
<b>Wells Fargo</b> Creditor's name <b>One Home Campus BK PMT PROC</b> Number Street <b>MAC #X2302-04C</b>				
<input checked="" type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Other _____				
	<b>Des Moines</b> City	<b>IA</b> State	<b>50328</b> ZIP Code	

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations such as child support and alimony.

No

Yes. List all payments to an insider.

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

**9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Case title <b>Nasrene Arabi v. Ali Javaherian, Majid Toloui, Persepolis Oriental Rud of</b>	Nature of the case <b>Debt collection</b>	Court or agency <b>Eastern Federal District of New York</b>	Status of the case <input checked="" type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input type="checkbox"/> Concluded
City _____ State _____ ZIP Code _____			

Case title <b>American Express Centurion Bank v. Fatemeh Toloui</b>	Nature of the case <b>Debt Collection</b>	Court or agency <b>Denton Count Ct. at Law No. 2</b>	Status of the case <input checked="" type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input type="checkbox"/> Concluded
City _____ State _____ ZIP Code _____			

Case title <b>Shafer Plaza 06 A LLC v. Persepolis Oriental Ruds of Dallas, Inc. and Majid Toloui</b>	Nature of the case <b>Debt Collection</b>	Court or agency <b>Collin County Ct. at Law No. 6</b>	Status of the case <input checked="" type="checkbox"/> Pending
		Court Name	<input type="checkbox"/> On appeal
		Number Street	<input type="checkbox"/> Concluded
City _____ State _____ ZIP Code _____			

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?**

Check all that apply and fill in the details below.

No. Go to line 11.

Yes. Fill in the information below.

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

No

Yes. Fill in the details.

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

No

Yes

#### Part 5: List Certain Gifts and Contributions

---

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

No

Yes. Fill in the details for each gift.

**14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?**

No

Yes. Fill in the details for each gift or contribution.

#### Part 6: List Certain Losses

---

**15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?**

No

Yes. Fill in the details.

#### Part 7: List Certain Payments or Transfers

---

**16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?**

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required for your bankruptcy.

No

Yes. Fill in the details.

<u>Law Offices of Michael R. Sices, PC</u> Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
<u>2000 N. Central Expressway, Suite 209</u> Number Street		<u>06/30/2016</u>	<u>\$4,000.00</u>

Plano TX 75074  
City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No  
 Yes. Fill in the details.

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No  
 Yes. Fill in the details.

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

No  
 Yes. Fill in the details.

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

---

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

No  
 Yes. Fill in the details.

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No  
 Yes. Fill in the details.

**Part 9: Identify Property You Hold or Control for Someone Else**

---

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

No  
 Yes. Fill in the details.

Where is the property?	Describe the property	Value
------------------------	-----------------------	-------

Tepp Team Rugs New Jersey

Owner's Name

Rugs

\_\_\_\_\_

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Debtor 1	<b>Majid</b> First Name	<b>Toloui</b> Middle Name	<b>Last Name</b>	Case number (if known) _____		
				<b>Where is the property?</b>	<b>Describe the property</b>	<b>Value</b>
<b>Loloi Rugs</b> Owner's Name				<b>Rugs</b>		
Number Street		Number Street				
City	State ZIP Code	City	State ZIP Code			
				<b>Where is the property?</b>	<b>Describe the property</b>	<b>Value</b>
<b>Feizy Rugs</b> Owner's Name				<b>Rugs</b>		
Number Street		Number Street				
City	State ZIP Code	City	State ZIP Code			

### Part 10: Give Details About Environmental Information

---

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar item.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

No  
 Yes. Fill in the details.

25. Have you notified any governmental unit of any release of hazardous material?

No  
 Yes. Fill in the details.

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_  
 First Name Middle Name Last Name

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

No  
 Yes. Fill in the details.

### Part 11: Give Details About Your Business or Connections to Any Business

---

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)  
 A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation

No. None of the above applies. Go to Part 12.  
 Yes. Check all that apply above and fill in the details below for each business.

**28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.**

No  
 Yes. Fill in the details below.

### Part 12: Sign Below

---

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

X /s/ Majid Toloui  
 Majid Toloui, Debtor 1

X \_\_\_\_\_  
 Signature of Debtor 2

Date 07/11/2016

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No  
 Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No  
 Yes. Name of person \_\_\_\_\_ Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

**Fill in this information to identify your case:**

Debtor 1	<b>Majid</b> First Name	<b>Toloui</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>			
Case number (if known)			

Check if this is an amended filing

**Official Form 108****Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Hold Secured Claims**

1. For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Hold Claims Secured by Property* (Official Form 106D), fill in the information below.

**Identify the creditor and the property that is collateral****What do you intend to do with the property that secures a debt?****Did you claim the property as exempt on Schedule C?**

Creditor's name: **Ally Financial**

Surrender the property.  
 Retain the property and redeem it.  
 Retain the property and enter into a *Reaffirmation Agreement*.  
 Retain the property and [explain]:

No  
 Yes

Description of property securing debt: **2015 Chevy Tahoe**

Surrender the property.  
 Retain the property and redeem it.  
 Retain the property and enter into a *Reaffirmation Agreement*.

No  
 Yes

Retain the property and [explain]:  
**Debtor will continue making payments to creditor without reaffirming.**

Creditor's name: **Ford Credit**

Description of property securing debt: **2015 Ford T250 Van (approx. 22000 miles) \* This va**

Surrender the property.  
 Retain the property and redeem it.  
 Retain the property and enter into a *Reaffirmation Agreement*.

No  
 Yes

Retain the property and [explain]:  
**Debtor will continue making payments to creditor without reaffirming.**

Creditor's name: **Ocwen Loan Servicing, LLC**

Description of property securing debt: **4809 Cypress Point Frisco TX 75034**

Surrender the property.  
 Retain the property and redeem it.  
 Retain the property and enter into a *Reaffirmation Agreement*.  
 Retain the property and [explain]:

No  
 Yes

Debtor 1 Majid Toloui Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

**Identify the creditor and the property that is collateral**

Creditor's name: **Santander Consumer USA Inc.**

Description of property securing debt: **2011 S550 Mercedes Benz (approx. 35000 miles)**

**What do you intend to do with the property that secures a debt?**

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]:  
**Debtor will continue making payments to creditor without reaffirming.**

No  
 Yes

Creditor's name: **Wells Fargo**

Description of property securing debt: **4809 Cypress Point Frisco TX 75034**

- Surrender the property.
- Retain the property and redeem it.
- Retain the property and enter into a *Reaffirmation Agreement*.
- Retain the property and [explain]:

No  
 Yes

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

**Describe your unexpired personal property leases****Will this lease be assumed?**

Lessor's name: **Shafer Plaza 06 A, LLC**

Description of leased property: **Listed out of an abundance of caution (not in debtor's name personally) based on any potential liability for commercial lease to Haramian Rugs, Inc. or Persepolis Oriental Rugs of Dallas, Inc.**

No  
 Yes

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and personal property that is subject to an unexpired lease.

X /s/ Majid Toloui  
Majid Toloui, Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date 07/11/2016  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

B2030 (Form 2030) (12/15)

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF TEXAS  
SHERMAN DIVISION**

In re **Majid Toloui**

Case No. \_\_\_\_\_

Chapter **7** \_\_\_\_\_

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept.....	<b>\$3,665.00</b>
Prior to the filing of this statement I have received.....	<b>\$3,665.00</b>
Balance Due.....	<b>\$0.00</b>

2. The source of the compensation paid to me was:

Debtor       Other (specify)

3. The source of compensation to be paid to me is:

Debtor       Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with another person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

**Adversary Proceedings**

**Objections to Discharge**

**Exceptions to Discharge**

**Motions to Lift Stay**

**Adding Creditors After filing**

**Objections to Exemptions**

**Motions to Dismiss**

**Attending any rescheduled hearings requested because of Debtors failure to appear**

**Modifying schedules after filing due to Debtor providing new/different information**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

---

**07/11/2016**

Date

**/s/ Michael R. Sices**

*Michael R. Sices*

Bar No. 24070616

Law Offices of Michael R. Sices, PC

2000 N. Central Expressway, Suite 209

Plano, TX 75074

Phone: (972) 914-8372 / Fax: (972) 360-3264

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**/s/ Majid Toloui**

*Majid Toloui*

**UNITED STATES BANKRUPTCY COURT  
EASTERN DISTRICT OF TEXAS  
SHERMAN DIVISION**

IN RE: **Majid Toloui**

CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 7/11/2016

Signature */s/ Majid Toloui*  
*Majid Toloui*

Date \_\_\_\_\_

Signature \_\_\_\_\_

ADT Security Services  
Attn: Bankruptcy Dept.  
PO Box 371878  
Pittsburgh, PA 15250

All State Insurance  
Attn: Bankruptcy Dept.  
PO Box 650271  
Dallas, TX 75265

Ally Financial  
Attn: Bankruptcy Dept.  
PO Box 380902  
Minneapolis, MN 55438

Alma Animal Hospital  
808 S. Alma Dr.  
Allen, TX 75013

American Express Centurion Bank  
c/o Zwicker & Associates, P.C.  
Attn: Troy Bolen  
Old Town Square, 1 Chisolm Trail STE 301  
Round Rock, TX 78681

Armen Oriental Rug Cleaning Co. Inc.  
4743 Carol Lane  
Dallas, TX 75247

ARSI  
Attn: Bankruptcy Dept.  
555 St. Charles Dr. Suite 100  
Thousand Oaks, CA 91360

Assurant Health  
PO Box 624  
Milwaukee, WI 53201

AT&T  
Attn: Bankruptcy Dept.  
PO Box 5017  
Carol Stream, IL 60197

AT&T Mobility  
PO Box 6463  
Carol Stream, IL 60197

BlueCross BlueShield of Texas  
Attn: Bankruptcy Dept.  
PO Box 3239  
Naperville, IL 60566

Call Isaacks Gordon & Roberts PC  
Attn: David B. McCall  
777 E. 15th Street  
Plano, TX 75074

Careflite  
c/o CMC Collections Dept.  
Attn: Bankruptcy Dept.  
PO Box 660911  
Dallas, TX 75266-0911

Cash LLC c/o Michael J. Scott, PC  
PO Box 115220  
Carrollton, TX 75011

Chase  
Attn: Bankruptcy Dept.  
Mail Code LA4-5555  
700 Kansas Lane  
Monroe, LA 71203

Chase - Slate  
PO Box 94014  
Palatine, IL 60094-4014

Check Systems  
Attn: Consumer Relations  
7805 Hudson Road, Suite 100  
Saint Paul, MN 55125-0000

Children's Health  
Attn: Bankruptcy Dept.  
1935 Medical District Dr.  
Dallas, TX 75235

City of Frisco  
Attn: Bankruptcy Dept.  
PO box 203598  
Dallas, TX 75320

Click4Corp  
Attn: Bankruptcy Dept.  
PO Box 207  
Allen, TX 75013

Collin Central Appraisal District  
250 W. Eldorado Pkwy  
McKinney, TX 75069-0000

Colonial County Mutual Insurance Company  
c/o Driskell & Wright  
105 Decker Court STE 150  
Irving, TX 75062

Continental Exchange Solutions, Inc.  
Attn: Bankruptcy Dept.  
7001 Villague Dr. STE 200  
Buena Park, CA 90621

Credit Collection Services  
Attn: Bankruptcy Dept.  
725 Canton St.  
Norwood, MA 02062

Credit Collection Services  
PO Box 55126  
Boston, MA 02205

Dallas Morning News  
Attn: Bankruptcy Dept.  
508 Young St.  
Dallas, TX 75202

Dan & Kathy Yost  
c/o M. Drew Siegel & Asst.  
1620 Beltline Rd. Suite 201  
Carrollton, TX 75006

Degrasse & Rolnick  
Attn: Donald D. DeGrasse  
1800 Bering, Suite 1000  
Houston, TX 77057

Desi Yellow Pages LLC  
d/b/a B Magazine  
c/o Farrah I. Ahmed, PLLC  
13140 Coit Rd. Ste 350  
Dallas, TX 75240

Discover Bank / Financial Services  
PO Box 6103  
Carol Stream, IL 60197-6103

Eastern Account System of Conn. Inc.  
PO Box 837  
Newtown, CT 06470

Eaton & Van Winkle LLP  
Attn: Lawrence A. Steckman, Esq.  
3 Park Ave. 16th Floor  
New York, NY 10016

Ebisons Harounian Imports  
389 Fifth Ave. Ste 508  
New York, NY 10016

Elavon, Inc.  
c/o Barnett & Garcia  
3821 Juniper Trace, STE 108  
Austin, TX 78738

EQUIFAX INFO SERVICES  
POB 740256  
Atlanta, GA 30374-0000

Estate of Ali Javaharian  
c/o Dan E. Martens, Esq.  
17101 Preston Road, Suite 160  
Dallas, Texas 75248

Evnision Healthcare  
Attn: Bankruptcy Dept.  
PO Box 847925  
Dallas, TX 75284

EXPERIAN  
POB 2002  
Allen, TX 75013-0000

Farmers Insurance  
Attn: Bankruptcy Dept.  
15700 Long Cista Dr.  
Austin, TX 78728

Fatameh Toloui  
4809 Cypress Point  
Frisco, TX 75034

Ford Credit  
Attn: Bankruptcy Dept.  
PO Box 650575  
Dallas, TX 75265

Frisco Emergency Medicine Associates  
Attn: Bankruptcy Dept.  
PO Box 12872  
Oklahoma City, OK 73157

Frisco Impact News  
Attn: Bankruptcy Dept.  
16225 Impact Way, Ste. 1  
Pflugerville, TX 78660

Frisco ISD Tax Office  
Attn: Bankruptcy Dept.  
6948 Maple Street  
Frisco, TX 75034

Frisco Style Magazine  
Attn: Bankruptcy Dept.  
7790 Main St, Frisco  
Frisco, TX 75033

Geico Insurance / Mutual  
Attn: Bankruptcy Dept.  
One Geico Plaza  
Bethesda, MD 20811-0001

H.M. Nabarian & Sons, Inc.  
36 E. 31st. St.  
New York, NY 10016

Harold Neil Jacobsen MD  
Attn: Bankruptcy Dept.  
17440 Dallas Pkwy STE 208  
Dallas, TX 75287

Harounian Rugs Intl.  
261 Fifth Ave.  
New York, NY 10016

Harris Methodist Hospital  
Attn: Bankruptcy Dept.  
PO Box 916060  
Fort Worth, TX 76191

Hudson Law Firm, P.C.  
1846 E. Rosemeade Pkwy STE 239  
Carrollton, TX 75007

Improvement Services, Inc.  
dba Imburgia Construction  
211 Elvis Presly Ln.  
Rockwall, TX 75032

INTERNAL REVENUE SERVICE  
CENTRALIZED INSOLVENCY OPERATIONS  
PO Box 7346  
PHILADELPHIA PA 19114-0326

INTERNAL REVENUE SERVICE  
CENTRALIZED INSOLVENCY OPERATIONS  
PO Box 21126  
PHILADELPHIA PA 19114-0326

James A. Frazier  
One Allen Center  
700 Central Expy S. STE 150  
Allen, TX 75013

Jaunty Co., Inc.  
Attn: Bankruptcy Dept.  
13535 S. Figueroa Street  
Los Angeles, CA 90061

Kaufman & Kahn  
Attn: Mark Kaufman  
747 Third Avenue, 32nd Floor  
New York, NY 10017

Labcorp  
PO Box 2240  
Burlington, NC 27216

LCA Collections  
PO Box 2240  
Burlington, NC 27216

Lee Dental  
6351 Preston Rd. STE 300  
Frisco, TX 75034

Leo's Landscape  
2705 W. Ledbetter Rd.  
Dallas, TX 75233

Linebarger Goggan Blair & Sampson, LLP  
2777 N. Stemmons Fwy STE 1000  
Dallas, TX 75207

MD Pathology  
Attn: Bankruptcy Dept.  
PO Box 671002  
Dallas, TX 75267

Merhcant Services Collection Dept.  
PO Box 9599  
Knoxville, TN 37940

Nasrene Arabi  
60-24 255th Street  
Little Neck, NY 11362

North Texas Tollway Authority  
PO Box 660244  
Plano, TX 75026

Ocwen Loan Servicing, LLC  
PO Box 24738  
West Palm Beach, FL 33416-4738

Professional Account Management, LLC  
PO Box 866608  
Plano, TX 75086

Progressive County Mutual Insurance  
Attn: Bankruptcy Dept.  
PO Box 650201  
Dallas, TX 75265

Propath Associates  
Dept. 41070  
Attn: Bankruptcy Dept  
PO Box 660811  
Dallas, TX 75266-0811

Ria  
Attn: Bankruptcy Dept.  
77001 Village Dr. STE 200  
Buena Park, CA 90621

Richard D. Pullman Esq.  
Kessler & Collins, P.C.  
2100 Ross Avenue, Suite 750  
Dallas, TX 75201

Robson Communities, Inc.  
9532 E. Riggs Rd.  
Chandler, AZ 85248

Santander Consumer USA Inc.  
8585 N. Stemmons Frwy, Ste. 1100-N  
Dallas, TX 75247-3822

Shafer Plaza 06 A, LLC  
c/o Richard D. Pullman Kesller & Collins  
2100 Ross Ave. Suite 750  
Dallas, TX 75201

Shafer Property Company  
Attn: Bankruptcy Dept.  
7015 Snider Plaza, Suite 207  
Dallas, TX 75205

Soraya Javaherian  
4512 Salerno Cir.  
Plano, TX 75093

Synchrony Bank  
Attn: Bankruptcy Dept.  
PO Box 960061  
Orlando, FL 32869-0061

TELECHECK  
5251 WESTHEIMER  
Houston, TX 77056-0000

Texas Carpet Binding  
17811 Davenport Rd. STE 18  
Dallas, TX 75252

Texas Comptroller of Public Accounts  
Attn: Bankruptcy Dept.  
PO Box 149359  
Austin, TX 78714

Texas Medicine Resources  
PO Box 8549  
Fort Worth, TX 76124

The Abramson Law Group, PLLC  
Attn: Mitchell B. Schekman, Esq.  
570 Lexington Ave. 23rd Floor  
New York, NY 10022

Thompson & Knight  
Attn: Ron Firestone collection coordinat  
PO Box 660684  
Dallas, TX 75266-0684

Time Warner Cable  
PO Box 650063  
Dallas TX 75265-0063

TRANSUNION  
POB 1000  
Crum Lynne, PA 19022-0000

Uline  
Attn: Bankruptcy Dept.  
PO Box 88741  
Chicago, IL 60680

United Health Care  
c/o Balekian Hayes, PLLC  
4144 N. Central Expy STE 1200  
Dallas, TX 75204

United Revenue Corp  
Attn: Bankruptcy Dept.  
204 Billings Suite 120  
Arlington, TX 76010-0000

UT Southwestern Medical Center  
Attn: Bankruptcy Dept.  
PO Box 848009  
Dallas, TX 75284

Warmbrodt, Winslow & Asst.  
Attn: Randall Warmbrodt  
One Allen Center  
700 Central Expy STE 150  
Allen, TX 75013

Wells Fargo  
One Home Campus BK PMT PROC  
MAC #X2302-04C  
Des Moines, Iowa 50328

Wells Fargo Card Services  
Attn: Bankruptcy Dept.  
PO Box 51193  
Los Angeles, CA 90051-5493

Wright Ginsberg Brusilow PC  
14755 Preston Road, STE 660  
Dallas, TX 75254

**Fill in this information to identify your case:**

Debtor 1	<b>Majid</b> First Name	<b>Toloui</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>			
Case number (if known)			

 Check if this is an amended filing**Official Form 122A-1Supp****Statement of Exemption from Presumption of Abuse Under § 707(b)(2)**

12/15

File this supplement together with Chapter 7 Statement of Your Current Monthly Income (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

**Part 1: Identify the Kind of Debts You Have**

1. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family or household purpose." Make sure that your answer is consistent with the answer you gave at line 16 of the Voluntary Petition for Individuals Filing for Bankruptcy (Official Form 101).

No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

**Part 2: Determine Whether Military Service Provisions Apply to You**

2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))?

No. Go to line 3.

Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Go to line 3.

Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

## 3. Are you or have you been a Reservist or member of the National Guard?

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_ which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 122A-1. On the top of page 1 of Form 122A-1, check box 3, *The Means Test does not apply now* and sign Part 3. Then submit this supplement with the signed Form 122A-1. You are not required to fill out the rest of Official Form 122A-1 during the exclusion period. The exclusion period means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

**Fill in this information to identify your case:**

Debtor 1	<b>Majid</b> First Name	<b>Toloui</b> Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>EASTERN DISTRICT OF TEXAS</b>			
Case number (if known)			

**Check one box only as directed in this form and in Form 122A-1Supp:**

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

 Check if this is an amended filing**Official Form 122A-1****Chapter 7 Statement of Your Current Monthly Income****12/15**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income****1. What is your marital and filing status? Check one only.**

**Not married.** Fill out Column A, lines 2-11.

**Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.

**Married and your spouse is NOT filing with you. You and your spouse are:**

- Living in the same household and are not legally separated.** Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated.** Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

<b>Column A</b> <b>Debtor 1</b>	<b>Column B</b> <b>Debtor 2 or non-filing spouse</b>
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**2. Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions). \_\_\_\_\_    \_\_\_\_\_

**3. Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in. \_\_\_\_\_    \_\_\_\_\_

**4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3. \_\_\_\_\_    \_\_\_\_\_

Debtor 1 Majid \_\_\_\_\_ Middle Name Toloui \_\_\_\_\_ Last Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

<b>Column A</b> <b>Debtor 1</b>	<b>Column B</b> <b>Debtor 2 or non-filing spouse</b>
------------------------------------	---

**5. Net income from operating a business, profession, or farm**

Debtor 1	Debtor 2
----------	----------

Gross receipts (before all deductions) \_\_\_\_\_ \_\_\_\_\_

Ordinary and necessary operating expenses - \_\_\_\_\_ - \_\_\_\_\_

Net monthly income from a business, profession, or farm \_\_\_\_\_ **Copy here →** \_\_\_\_\_

Copy  
here →

**6. Net income from rental and other real property**

Debtor 1	Debtor 2
----------	----------

Gross receipts (before all deductions) \_\_\_\_\_ \_\_\_\_\_

Ordinary and necessary operating expenses - \_\_\_\_\_ - \_\_\_\_\_

Net monthly income from rental or other real property \_\_\_\_\_ **Copy here →** \_\_\_\_\_

Copy  
here →

**7. Interest, dividends, and royalties****8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: .....↓

For you..... \_\_\_\_\_

For your spouse..... \_\_\_\_\_

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. \_\_\_\_\_**10. Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

[ ] + [ ] = [ ]

Total current  
monthly income

**11. Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

Debtor 1 Majid  
 First Name      Middle Name      Last Name      Case number (if known) \_\_\_\_\_

## Part 2: Determine Whether the Means Test Applies to You

### 12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....Copy line 11 here → 12a. \_\_\_\_\_

Multiply by 12 (the number of months in a year).

12b. The result is your annual income for this part of the form.

X 12

12b. \_\_\_\_\_

### 13. Calculate the median family income that applies to you. Follow these steps:

Fill in the state in which you live. \_\_\_\_\_

Fill in the number of people in your household. \_\_\_\_\_

Fill in the median family income for your state and size of household..... 13. \_\_\_\_\_

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

### 14. How do the lines compare?

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*.  
 Go to Part 3.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2*.  
 Go to Part 3 and fill out Form 122A-2.

## Part 3: Sign Below

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X** /s/ Majid Toloui  
 Majid Toloui, Debtor 1

**X** \_\_\_\_\_  
 Signature of Debtor 2

Date 7/11/2016  
 MM / DD / YYYY

Date \_\_\_\_\_  
 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.